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PTO/SB/121 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

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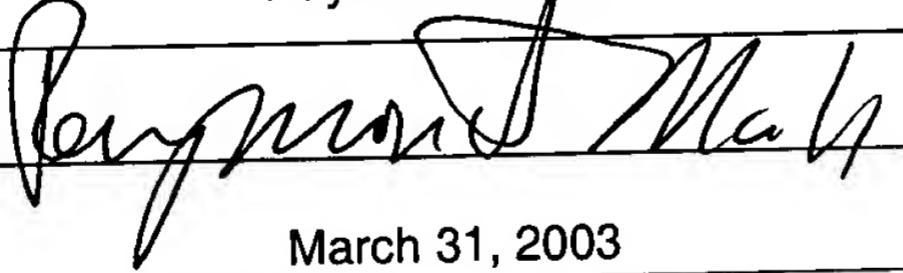
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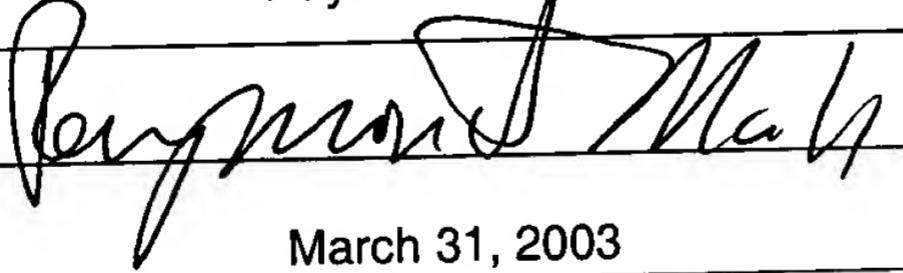
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 Request for Customer Number (PTO/SB/125) submitted herewith.
in the following listed application(s) or patent(s):

| Patent Number (if appropriate) | Application Number | Patent Date (if appropriate) | U.S. Filing Date |
|-----------------------------------|--------------------|---------------------------------|---------------------|
| | 09/866,677 | | May 30, 2001 |

(check one)

| | | |
|--------------------------|--|--|
| Typed or Printed Name | Raymond Y. Mah | <input type="checkbox"/> Applicant or Patentee |
| Signature |  | <input type="checkbox"/> Assignee of record of the entire interest. Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form PTO/SB/96) |
| Date | March 31, 2003 | <input checked="" type="checkbox"/> Attorney or Agent of record |
| Address of signer: | 1100 North Glebe Road, 8 th Floor Arlington, VA 22202 | 41,426 (Reg. No.) |

 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.* 
 *Total of **1** forms are submitted.

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In re Patent Application of
KOBAYASHI et al



Serial No. 09/866,677
Filed: May 30, 2001

Atty Dkt. 461-69
C# M#
Group Art Unit: 2834
Examiner: Aguirrechea, J.
Date: March 31, 2003

Title: PIEZOELECTRIC DEVICE FOR INJECTOR

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

Correspondence Address Indication Form Attached.

Fees are attached as calculated below:

| | | | | |
|--|----|---------------------------|-----------------|-------------------------------------|
| Total effective claims after amendment previously paid for | 16 | minus highest number 0 | \$ 18.00 | \$ 0.00 |
| Independent claims after amendment previously paid for | 8 | minus highest number 2 | \$ 84.00 | \$ 168.00 |
| If proper multiple dependent claims now added for first time, add \$280.00 (ignore improper) | | | | \$ 0.00 |
| Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s) (\$110.00/1 month; \$410.00/2 months; \$930.00/3 months) | | | | \$ 0.00 |
| Terminal disclaimer enclosed, add \$ 110.00 | | | | \$ 0.00 |
| <input type="checkbox"/> First/second submission after Final Rejection pursuant to 37 CFR 1.129(a) (\$750.00) | | | | \$ 0.00 |
| <input type="checkbox"/> Please enter the previously unentered , filed | | | | |
| <input type="checkbox"/> Submission attached | | | | |
| | | | Subtotal | \$ 168.00 |
| If "small entity," then enter half (1/2) of subtotal and subtract | | | | -\$ 0.00 |
| <input type="checkbox"/> Applicant claims "small entity" status. <input type="checkbox"/> Statement filed herewith | | | | |
| Rule 56 Information Disclosure Statement Filing Fee (\$180.00) | | | | \$ 0.00 |
| Assignment Recording Fee (\$40.00) | | | | \$ 0.00 |
| Other: | | | | 0.00 |
| | | | | TOTAL FEE ENCLOSED \$ 168.00 |

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

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NIXON & VANDERHYE P.C.
By Atty: Raymond Y. Mah, Reg. No. 41,426

Signature: 